PCT

POWER OF ATTORNEY

(for an international application filed under the Patent Cooperation Treaty)

(PCT Rule 90.4)

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The undersigned applicant(s) (Names should be indicated as they appear in the request):		**************************************	
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hereby appoints (appoint) the following per	son as: X agent	common representative	
Name and address (Family name followed by given name; for a legal entity,	full official designation. The address must i	nclude postal code and name of country.)	
PETRUZZIELLO ALDO - COGGI G RACHELI & C. SPA VIALE SAN MICHELE DEL CARSO IT - 20144 MILANO			
to the form	XX all the comp	petent International Authorities	
to represent the undersigned before	23.03	ional Searching Authority only	
		tional Preliminary Examining Authority of	nly
in connection with the international application of the invention: GUIT INTO A DISPOSATE AUTOMATIC: SAFETY SYRINGE Applicant's or agent's fill	IARD MECHANISM ATTACHA BLE AUTOMATIC SAFETY S	ABLE TO A STANDARD SYRINGE T SYRINGE AND RELATIVE DISPOSA	TO MAKE
1.	number (if already available)	•	
filed with the following Office ITAL and to make or receive payments on beha	IAN PATENT AND TRADEMA	ARK OFFICE as recei	iving Office
Signature of the applicant(s) (where the the capacity	e are several applicants, each of them must in which the person signs, if such capacity	sign; next to each signature, indicate the name of the pe is not obvious from reading the request or this power):	rson signing and
(RIGHI NARDINO)	Amilyadee	6	
(ROSSI ROBERTO)	Hom Vohl		
(RESTELLI SERGIO9	Lengo Rus	ie	
NOVEMBER 12, 2002			
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